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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

N41415

(3)

THE HELEN ECCLESTONE STONE CHARITABLE FOUNDATION

Principal Place of Business Mailing Address 3300 PGA BLVD. 3300 PAG BLVD. 3. Date Incorporated or Qualified STE. 805 STE. BOS <u>12/26/1990</u> W. PALM BEACH FL 33410 W. PALM BEACH FL 33410 4. FEI Number Applied For 59-3041774 Not Applicable 2a. Mailing Address 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees · Zimr This corporation owes or has paid the current year intangible Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 8500 PGA BLVD. 8TE. 805 **B3** W. PALM BEACH FL 33410 84 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ☐ DELETE 1.1 TITLE ☐ Change Addition NAME STONE, HELEN E 12 NAME STREET ADDRESS 3300 PGA BLVD., STE. 805 1.3 STREET ADDRESS W. PALM BEACH FL CITY-ST-ZIP 1.4 CITY - ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME SHAFFER, MARGARET B 2.2 NAME STREET ADORESS 3300 PGA BLVD., STE. 805 2.3 STREET ADDRESS CITY-ST-ZIP <u>West Palm Be</u>ach Fl 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME REYNOLDS, SHEILA B 3.2 NAME STREET ADDRESS 3300 PGA BLVD., STE, 805 3.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition MASE REYNOLDS, SHEILA B 4.2 NAME 3300 PGA BLVD., STE. 805 STREET ADDRESS 4.3 STREET ADDRESS <u>We</u>st Palm Beach Fl CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE **DELETE** 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP MLE DELETE 6.1 TITLE Change Addition

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

MALIF

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 05 1998 8:00am

Secretary of State